

KIDS GET CARE RECIPE

King County Health Action Plan

Focus:	Ensure that children, regardless of insurance status, receive early integrated preventive physical, oral and developmental health services through attachment to medical and dental homes.		
Target Population:	Low-income children birth to 18 years of age in King County		
	<i>What you need...</i>	<i>What they do...</i>	<i>When blended together the system of care is transformed by...</i>
People:	Champion – at least one Program Manager - one Case Managers –one at each clinic hub site Trainer - one Community Advocates - multiple	<ul style="list-style-type: none"> – Provide top level support, broad expertise, energy and credibility to the project – Coordinates overall efforts to meet the project goals and outcomes – Work specifically with target population, troubleshoots issues that prevent access to care, coordinates inreach effort at hub sites and outreach effort with CBOs – Works within clinic and target communities training “trainers”, teaching preventive practices and the importance of a health care home – Respected members of a community who provide credibility to health promotion messages 	Building capacity in a clinic system and the surrounding community through a shared focus on early integrated preventive care and reducing barriers to care
Resources:	<u>Community Tools</u> Health Education Materials “Red Flag” Development & Oral Health Tools <u>Clinical Tools</u> EPSDT Forms Clinical Caries Risk Assessment Tool	<ul style="list-style-type: none"> – Provide health information and sources of care to parents and child advocates – Help parents and advocates catch problems earlier – Ensure that well child visits are comprehensive – Allows primary care medical providers to assess the oral health of a child and when to provide fluoride varnish 	Providing a multi-dimensional integrated approach to health that includes physical, mental, social, emotional, developmental and oral health domains
Community Infrastructure:	FQHCs and/or other community based clinics CBOs Other Community Providers CHAP (Healthy Mothers, Healthy Babies)	<ul style="list-style-type: none"> – Provide integrated preventive health care and dental services to low income children – Such as WIC, Early Head Start, Head Start, ECEAP, child care providers... provide connections to families with young children – Such as mental health specialists or pediatric dentists serve as consultants to project and a referral source for specialty care – Central referral source for the community – one stop shopping for families seeking care 	Creating a service-based program that links children to a community-based, integrated continuum of care
Approximate Cost:	Champion – priceless, Program Manager* (.5 FTE)- \$33,000, Case Manager* - \$38,400 (each), Trainer* - \$48,000, Community Advocates – no cost		
18 Month Outcomes:	<ul style="list-style-type: none"> – Over 2500 health professional and staff members from community based organizations have been trained to provide oral and developmental health screenings – 55% average increase in the number of Well Child Exams at KGC hub sites, and over – 5,000 children connected to health care homes 		
Cost Savings and Return on Investment (ROI):	<ul style="list-style-type: none"> – Potential net annual savings with oral health screening and application of fluoride varnish in Well Child Checks \$345,506¹ – A recent study of >100,000 Medicaid kids in California shows that when two year olds are up to date on Well Child Checks they are 48% less likely to have avoidable hospitalizations.² WA state cost data using the same CPT codes is being analyzed by the author to produce ROI figures on KGC hubsites’ (using 38% increase in up-to date 2 year old WCC rates.) 		

¹ Potential Cost Savings Analysis of Fluoride Varnish in EPSTD, Jay Donahue Washington Dental Service Foundation 2003

² Hakim, R and Bye, B, Effectiveness of Compliance With Pediatric Preventive Care Guidelines Among Medicaid Beneficiaries; *Pediatrics*;2001;108:90-97

* Includes benefits at 20%